

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10676012

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT									
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	
1	1						51							
2	1						52							
3		1					53							
4	1						54							
5		1					55							
6	1						56							
7		1					57							
8		1					58							
9		1					59							
10		0					60							
11		0					61							
12		0					62							
13		0					63							
14							64							
15							65							
16							66							
17							67							
18							68							
19							69							
20							70							
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42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	4						TOTAL IND.							
TOTAL DEP.	20						TOTAL DEP.							
TOTAL CLAIMS	24						TOTAL CLAIMS							